

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

PAC TO THE FUTURE

ADDRESS (number and street)

700 13th Street, NW

Suite 600

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00344234

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
02 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
02 28 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Paul Pelosi

Signature of Treasurer

Paul Pelosi

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
03 20 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
OnlyFEC FORM 3X  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PAC TO THE FUTURE

Report Covering the Period:

From:

 M M / D D / Y Y Y Y  
 02 / 01 / 2014

To:

 M M / D D / Y Y Y Y  
 02 / 28 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		467431.63
(b) Cash on Hand at Beginning of Reporting Period.....	487271.13	
(c) Total Receipts (from Line 19) .....	42500.00	70500.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	529771.13	537931.63
7. Total Disbursements (from Line 31) .....	25019.51	33180.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	504751.62	504751.62
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**PAC TO THE FUTURE**

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12500.00

30500.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

12500.00

30500.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

25000.00

35000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

37500.00

65500.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

5000.00

5000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

42500.00

70500.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

42500.00

70500.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8019.51	14180.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8019.51	14180.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	17000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	1000.00	2000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	1000.00	2000.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	25019.51	33180.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25019.51	33180.01

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	37500.00	65500.00
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36500.00	63500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	8019.51	14180.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	8019.51	14180.01

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 19

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial) <b>A. Richard W. Altig Jr.</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 04 / 2014</div> </div> <b>Transaction ID : C5367500</b>		
Mailing Address 10025 111th Avenue, NE			Amount of Each Receipt this Period <div> <div>1000.00</div> </div>		
City Kirkland	State WA	Zip Code 98033			
FEC ID number of contributing federal political committee. C					
Name of Employer Altig International		Occupation Chairman			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>			

Full Name (Last, First, Middle Initial) <b>B. Eric L. Cochran</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 04 / 2014</div> </div> <b>Transaction ID : C5367530</b>		
Mailing Address 1301 SE Princeton Place			Amount of Each Receipt this Period <div> <div>1000.00</div> </div>		
City Lees Summit	State MO	Zip Code 64081			
FEC ID number of contributing federal political committee. C					
Name of Employer American Income Life Insurance		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>			

Full Name (Last, First, Middle Initial) <b>C. Alexander Roland</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 04 / 2014</div> </div> <b>Transaction ID : C5415021</b>		
Mailing Address 4614 Lester Drive			Amount of Each Receipt this Period <div> <div>1000.00</div> </div>		
City Dallas	State TX	Zip Code 75219			
FEC ID number of contributing federal political committee. C					
Name of Employer American Income Life Insurance		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>1000.00</div> </div>			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<div> <div>3000.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only).....▶	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Nigel A. Crowe**

Mailing Address 4016 5th Ave. W

City State Zip Code  
 Palmetto FL 34221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 04 2014

**Transaction ID : C5367531**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Durhon Oldham**

Mailing Address 1995 Harris Road

City State Zip Code  
 Penfield NY 14526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 04 2014

**Transaction ID : C5367532**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Brandon C. Cooley**

Mailing Address 515 E. Magnolia Blvd.  
 Apt. A

City State Zip Code  
 Burbank CA 91501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 American Income Life Insurance

Occupation  
 Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 04 2014

**Transaction ID : C5367533**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<b>A. Steven H. Greer</b> Full Name (Last, First, Middle Initial) Mailing Address 43 Nocturne Woods Place City The Woodlands State TX Zip Code 77382 FEC ID number of contributing federal political committee. C Name of Employer American Income Life Insurance Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367535</b> Amount of Each Receipt this Period 1000.00
<b>B. Moswen W. Taylor</b> Full Name (Last, First, Middle Initial) Mailing Address 8923 E. 15th Street City Indianapolis State IN Zip Code 46219 FEC ID number of contributing federal political committee. C Name of Employer American Income Life Insurance Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367448</b> Amount of Each Receipt this Period 1000.00
<b>C. Desi Dimitrova</b> Full Name (Last, First, Middle Initial) Mailing Address 15206 Jupiter Street City Whittier State CA Zip Code 90603 FEC ID number of contributing federal political committee. C Name of Employer American Income Life Insurance Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367528</b> Amount of Each Receipt this Period 1000.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			3000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			3000.00



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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial) <b>A. Robert P Janev</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367499</b>		
Mailing Address 9 Longmeadow Dr.			Amount of Each Receipt this Period 1000.00		
City Barrington	State IL	Zip Code 60010			
FEC ID number of contributing federal political committee. C					
Name of Employer American Income Life Insurance		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) <b>B. Dustin Venekamp</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367529</b>		
Mailing Address 15440 Bel Red Road			Amount of Each Receipt this Period 1000.00		
City Redmond	State WA	Zip Code 98052			
FEC ID number of contributing federal political committee. C					
Name of Employer Altig International		Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) <b>C. Jenni Ackerman</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5367559</b>		
Mailing Address 5 Bristol Way			Amount of Each Receipt this Period 500.00		
City Hightstown	State NJ	Zip Code 08520			
FEC ID number of contributing federal political committee. C					
Name of Employer American Income Life Insurance		Occupation Insurance Agent			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			2500.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶					

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial) <b>A. Laura Fisher And Associates LLC</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5415022</b>		
Mailing Address 128 Wheeler Road			Amount of Each Receipt this Period 1000.00		
City	State	Zip Code			
Burlington	MA	01803			
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	LLC - Members below if itemized. Permissible funds.		
Full Name (Last, First, Middle Initial) <b>B. Laura Fisher</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 04 / 2014 <b>Transaction ID : C5415024</b>		
Mailing Address 128 Wheeler Rd.			Amount of Each Receipt this Period 1000.00		
City	State	Zip Code			
Burlington	MA	01803			
FEC ID number of contributing federal political committee.		C			
Name of Employer Laura Fisher and Associates LLC		Occupation Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	<b>[MEMO ITEM]</b> *		
Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code			
FEC ID number of contributing federal political committee.		C			
Name of Employer		Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			12500.00		

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<p>Full Name (Last, First, Middle Initial)  <b>A. United Pilots PAC/Airline Pilots Association</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 21 / 2014  <b>Transaction ID : C5419131</b></p>	
<p>Mailing Address 9550 West Higgins Road  Suite 1000</p>		<p>Amount of Each Receipt this Period  5000.00</p>	
<p>City Rosemont State IL Zip Code 60018</p>	<p>FEC ID number of contributing federal political committee. C C00251009</p>		
<p>Name of Employer</p>	<p>Occupation</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  5000.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B. International Brotherhood of Electrical Workers PAC</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 04 / 2014  <b>Transaction ID : C5367445</b></p>	
<p>Mailing Address 900 7th Street, NW</p>		<p>Amount of Each Receipt this Period  5000.00</p>	
<p>City Washington State DC Zip Code 20001</p>	<p>FEC ID number of contributing federal political committee. C C00027342</p>		
<p>Name of Employer</p>	<p>Occupation</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  5000.00</p>		
<p>Full Name (Last, First, Middle Initial)  <b>C. Sheet Metal Workers' Int'l Association PAL</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y Y  02 / 24 / 2014  <b>Transaction ID : C5419135</b></p>	
<p>Mailing Address 1750 New York Avenue, NW</p>		<p>Amount of Each Receipt this Period  5000.00</p>	
<p>City Washington State DC Zip Code 20006-5301</p>	<p>FEC ID number of contributing federal political committee. C C00007542</p>		
<p>Name of Employer</p>	<p>Occupation</p>		
<p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Aggregate Year-to-Date ▼  5000.00</p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>		<p>15000.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
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☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

## **A. American Podiatric Medical Association PAC**

Mailing Address 9312 Old Georgetown Road

City State Zip Code  
Bethesda MD 20814-1646

FEC ID number of contributing  
federal political committee.

**C** C00008839

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 04 2014

**Transaction ID : C5367446**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. United Food & Commercial Workers Int'l Union ABC**

Mailing Address 1775 K Street, NW

City State Zip Code  
Washington DC 20006-1521

FEC ID number of contributing  
federal political committee.

**C** C00002766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 21 2014

**Transaction ID : C5419129**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

25000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 19

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Bill Owens for Congress</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>02 / 21 / 2014</div> </div>	
Mailing Address PO Box 1575		<b>Transaction ID : C5419130</b>	
City Plattsburgh	State NY	Zip Code 12901	Amount of Each Receipt this Period <div>5000.00</div>
FEC ID number of contributing federal political committee. <div>C C00464495</div>			
Name of Employer		Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div>5000.00</div>	
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div></div>	
<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> </div>	
Mailing Address		Amount of Each Receipt this Period <div></div>	
City	State	Zip Code	
FEC ID number of contributing federal political committee. <div>C</div>			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div></div>	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		<div>5000.00</div>	
<b>TOTAL</b> This Period (last page this line number only)..... ▶		<div>5000.00</div>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 19

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Becca Durr**Mailing Address 333 C St SE  
Basement Unit

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 11 2014

Transaction ID : D388731

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. W Hotel**

Mailing Address 515 15th Street, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
Catering & Room Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 19 2014

Transaction ID : D388971

Amount of Each Disbursement this Period

1905.13

Full Name (Last, First, Middle Initial)

**C. Michael Smith**Mailing Address 1300 N Street, NW  
Apt. 103

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 11 2014

Transaction ID : D388732

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3905.13

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 19

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie LLP**Mailing Address 1201 Third Avenue  
Suite 4800City State Zip Code  
Seattle WA 98101Purpose of Disbursement  
Legal & Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 28 2014

Transaction ID : D389912

Amount of Each Disbursement this Period

1500.90

Full Name (Last, First, Middle Initial)

**B. Melissa Kurek**Mailing Address 1300 N Street NW  
Apt. 707City State Zip Code  
Washington DC 20005Purpose of Disbursement  
Strategic Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 11 2014

Transaction ID : D388733

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Elavon Merchant Services**

Mailing Address 7300 Chapman Highway

City State Zip Code  
Knoxville TN 37920Purpose of Disbursement  
Merchant Service Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
02 04 2014

Transaction ID : D390116

Amount of Each Disbursement this Period

62.94

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4063.84

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

### A. Elavon Merchant Services

Category/  
Type

29.34

State:  District:

## B. Elavon Merchant Services

02 / 03 / 2014

Category/  
Type

Age Group	Percentage
18-24	0.15
25-34	0.25
35-44	0.30
45-54	0.20
55-64	0.15
65-74	0.10
75-84	0.05
85+	0.05

State:  District:

### C. Elavon Merchant Services

Category/  
Type

20.00

State:  District:

50.54

8019.51



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Graham For Congress**

Mailing Address PO Box 310

City Tallahassee	State FL	Zip Code 32302-0310
---------------------	-------------	------------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Gwen Graham**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		26		2014

**Transaction ID : D389704**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Alex Sink for Congress**

Mailing Address PO Box 17271

City Clearwater	State FL	Zip Code 33762-0271
--------------------	-------------	------------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Alex Sink**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2014

**Transaction ID : D388345**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Recchia for Congress**

Mailing Address 172 Gravesend Neck Rd

City Brooklyn	State NY	Zip Code 11223-4707
------------------	-------------	------------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Domenic M Recchia Jr.**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2014

**Transaction ID : D388395**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PAC TO THE FUTURE**

Full Name (Last, First, Middle Initial)

**A. Committee To Elect Martha Robertson**

Date of Disbursement

Mailing Address PO Box 54

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

City Dryden	State NY	Zip Code 13053-0054
----------------	-------------	------------------------

**Transaction ID : D388396**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**Martha Robertson**Category/  
Type

2000.00
---------

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Full Name (Last, First, Middle Initial)

**B. Kevin Strouse for Congress**

Date of Disbursement

Mailing Address PO Box 186

M M M	/	D D D	/	Y Y Y Y Y Y
02		06		2014

City Bensalem	State PA	Zip Code 19020
------------------	-------------	-------------------

**Transaction ID : D388397**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**Kevin Strouse**Category/  
Type

2000.00
---------

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 08

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

City	State	Zip Code
------	-------	----------

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

4000.00
---------

**TOTAL** This Period (last page this line number only)..... ►

16000.00
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	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

NAME OF COMMITTEE (In Full)  
PAC TO THE FUTURE

### A. Kevin Davis

Mailing Address 4061 Powder Mill Road  
Ste. 700

City	State	Zip Code
Beltsville	MD	20705

Transaction ID : D388174

Purpose of Disbursement	Refund

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1000.00

**TOTAL** This Period (last page this line number only).....

1000.00